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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (93-38)//
POC/CAPT PERRY BISHOP/-/MED-00P (PUBLIC AFFAIRS)/-/TEL:(202)
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RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF INFORMATION
AND NEWS OF INTEREST TO NAVY AND MARINE CORPS MEMBERS, CIVILIAN
EMPLOYEES, DEPENDENTS, AND RETIRED BENEFICIARIES OF NAVY
MEDICINE. MAXIMUM AND TIMELY REDISTRIBUTION OR FURTHER
REPRODUCTION AND USE BY ACTION ADDRESSEES IS ENCOURAGED. THIS
MESSAGE HAS BEEN COORDINATED WITH THE COMMANDANT OF THE MARINE
CORPS (CMC). THE COMMANDANT HAS AUTHORIZED TRANSMISSION TO
MARINE CORPS ACTIVITIES.
2. RESPECTFULLY REQUEST FLEET COMMANDERS READD TO SHIPS AND
OTHER SUBORDINATES WITH MEDICAL PERSONNEL, AS OPERATIONAL
CONDITIONS PERMIT.
3. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:
(930374)-3d Dental Battalion Sailor Wins Christensen Award
(930375)-BUMED Admiral Receives German Award
(930376)-NMC Quantico EMT Course Gets Above-Average Results
(930377)-Olympic Hopeful Stationed at NavHosp Long Beach
(930378)-A 'Taste' of Life at Sea
(930379)-NMC Philadelphia Celebrates with a Healthy Breakfast
(930380)-Navy Medical Department People in Special Operations
(930381)-HEALTHWATCH: Smart Training Keeps You in the Running
(930382)-HIV and You!
(930383)-New CO at 2d Medical Battalion, Camp Lejeune (para 4)

HEADLINE: 3d Dental Battalion Sailor Wins Christensen Award
USNDC Okinawa, Japan (NSMN) -- DT1 Marilyn C. Crawford of
the 3d Dental Battalion has been named this year's winner of the
prestigious Dentalman Thomas Christensen Jr. Memorial Award.

Crawford is only the third recipient of the Christensen
Award. Sponsored by the Marine Corps Association, it is awarded
annually to a dental technician serving with the Fleet Marine
Force who made significant contributions to operational
readiness. Recognition is based upon actions that are creative
and innovative and that improved efficiency, economy and
productivity.

Soon after arriving at 3d Dental Battalion, Crawford assumed
the additional duties of career counselor and professional
affairs coordinator for both the battalion and the U.S. Naval
Dental Center Yokosuka, a job normally assigned to two petty
officers. Her tireless efforts in caring for the career needs of
120 enlisted and 65 dental officers greatly enhanced the combined
command's ability in meeting its primary and operational
missions.

Crawford, accompanied by her husband, DT1 Guy Crawford,

received a Semper Fidelis Statue and certificate from the commanding general, 3d Force Service Support Group, in a recent ceremony.

The Christensen Award is named in honor of DN Thomas A. Christensen Jr., who, during the Battle of Chosen Reservoir in Korea, was attached to an Amphibious Tractor Battalion that came under attack by Chinese Communists. During the battle, he rushed forward numerous times to rescue the wounded and offer first aid. Wounded himself, he continued to offer aid until he was mortally wounded at point blank range. For his actions, he was posthumously awarded the Navy Cross.

Story by LT Pete Rivera, MSC, USNDC Director for Administration
-USN-

HEADLINE: BUMED Admiral Receives German Award

BUMED Washington (NSMN) -- RADM William A. Buckendorf, MC, was awarded the Gold Cross of Honor of the German Armed Forces for his special assistance to the medical service of the German navy.

German Adm. Rudolf Lange, Defense Attache to the German Embassy, presented Buckendorf the prestigious award in a small ceremony at the German Embassy in Washington on 23 September.

Buckendorf is credited with implementing a training course that helped the German military's operational medicine initiatives. The course emphasizes preventive medicine and occupational health programs. Since 1991, the six-month course has been used continuously by many German military medical officers.

The course was implemented while Buckendorf served as the Assistant Chief for Fleet Readiness and Support in the Department of the Navy's Bureau of Medicine and Surgery from 1988 to 1991.
Story by LT Mark McDonald

-USN-

HEADLINE: NMC Quantico EMT Course Gets Above-Average Results

NMC Quantico, VA (NSMN) -- Naval Medical Clinic Quantico's Emergency Medical Technician Course recently graduated a group of students who all passed their final exam on the National Registry of EMTs. Thirteen students completed the 110-hour course on 20 September; 13 students are now certified EMTs.

This class's 100 percent completion is in sharp contrast to the national average for successful completion of 65.2 percent, and outshines even Quantico's high average, which is just above 90 percent.

The course is extremely demanding on students and lasts three straight weeks. During the course, students learn basic life support procedures, including CPR, bandaging, splinting, oxygen usage, treatment of shock and how to handle a variety of medical emergencies. Students also get the opportunity to tour a medic helicopter and observe a local trauma center for six hours. Students are tested daily on a vast array of material and routinely have reading assignments for homework.

On the next to the last day of class, students are tested on their practical knowledge and take a classroom final exam.

Students must pass both portions in order to take the test for the National Registry of EMTs the next day. Despite this exam's historically high failure rate, Quantico's latest EMT class not only had a 100 percent pass rate, but also broke the clinic's record for highest average test score.

This outstanding performance of Quantico's EMTs is a credit to the hard work of the students, excellent instructors and staff of the Naval Medical Clinic's Education and Training Department.

Quantico's course, taught four times a year, satisfies the guidelines provided by the Department of Transportation. It is offered to active duty members in all branches of the service and other government agencies, including the Federal Bureau of Investigation, the Drug Enforcement Agency, the Secret Service and the U.S. Marshals Service. If you are interested in taking the National Registry of Emergency Medical Technician Course, contact the clinic at (703) 640-2639, DSN 278-2639.

Story by LTjg A.L. Portis, MSC, and HM3 M. Messa

-USN-

HEADLINE: Olympic Hopeful Stationed at NavHosp Long Beach

NAVHOSP Long Beach, CA (NSMN) -- Radioman Third Class Carlos Ward of Naval Hospital Long Beach, CA, recently participated in the Council International Sport Military (CISM) tour in Paris, France, in the 800 meter track event. He ran a time of 1:50.12, which qualified him for the finals.

With a time of 1:47.56, Track and Field News Magazine ranks Ward 54th in the world and 12th in the nation in the 800 meter. He is ranked fifth in the world by military standards.

Ward ran against all of the nation's top competitors in the World Championship Trials in Eugene, OR, last June, and he consistently places in the top of the many track and field championships he participates in throughout the year.

As the All Armed Forces three-time defending champion, Ward's goal is to make the Olympic Track Team while also striving to give something back to his community.

Story by ENS Rebecca Springer, MSC

-USN-

HEADLINE: A 'Taste' of Life at Sea

USNH Guam (NSMN) -- A Navy dietician recently boarded USS Niagara Falls (AFS 3) to promote wellness during a five-day excursion in the Philippine Sea. LT Kimberly M. Kauffman, MSC, USNR, U.S. Naval Hospital Guam's dietician, provided nutrition information and assessed the ship's menu and food stores while aboard. She offered education on basic nutrition, weight loss, lowering blood cholesterol and sports nutrition. Crew members with specific nutritional concerns received individual counselling.

The ship's medical officer, PRT coordinators and Kauffman discussed aspects of weight loss counseling for remedial PRT members, the common use of protein supplements by crew members "to build muscle and speed up metabolism" and health promotion. Kauffman commended Niagara Falls for its current focus on healthy eating and the availability of lowfat food choices. She

encouraged the ship's Food Service and Medical departments to promote good nutrition by educating the crew about healthy food choices using available Navy resources. She also recommended how the ship could further expand on healthy food selections.

Kauffman analyzed the menu to determine the grams of fat in entrees offered at lunch and dinner. Entrees with 15 grams of fat or less were defined as healthy choices. Actions recommended by Kauffman, in coordination with the food service officer, included arranging the menu so that at least one lowfat entree was available at each meal, advertising the healthy food choice, and altering recipes to decrease the fat content of foods.

During Kauffman's time aboard Niagara Falls, foods that were normally fried were baked because of a technical problem with the deep-fat fryers. As a result, fat content of certain foods was significantly lower than usual. The Chief Mess Specialist indicated that "with the exception of french fries, the baked foods were well accepted by the crew." Kauffman encouraged limiting future use of the fryers.

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HEADLINE: NMC Philadelphia Celebrates with a Healthy Breakfast

NMC Philadelphia (NSMN) -- The staff at Naval Medical Clinic Philadelphia took an innovative approach to healthy eating last month when they celebrated National Breakfast Month with a Command Breakfast. The clinic's health promotion officer, ENS Cindy Colvin, coordinated the selection of food items for the 22 September breakfast, making sure that all foods served would contain less than five grams of fat per serving.

More than 30 staff members participated in the breakfast; many were pleasantly surprised at the variety of healthy foods they could be eating.

People often skip breakfast because of hurried work schedules or the time it takes to cook a morning meal. Philadelphia's Command Breakfast offered a variety of foods that were quick, easy, tasty and good for you, including: West Virginia apples, whole wheat and sourdough toast, pancakes with light syrup, bagels and cheese, salmon quiche and a tomato and bread plate.

The U.S. Department of Agriculture's Food Guide Pyramid emphasizes the largest portion of the diet should come from starches and grains -- six to 11 servings daily. These foods are an important source of energy and are low in calories. So eat several servings of whole grains, breads and cereals daily and get energized.

Story by CDR Joan M. Pate, NC

-USN-

HEADLINE: Navy Medical Department People in Special Operations

BUMED Washington (NSMN) -- Wherever the Navy or Marine Corps goes, so does the Navy Medical Department. Thirty percent of our personnel are normally assigned with deployable fleet and fleet marine forces units. Additional medical support is provided for operations such as Provide Promise. Here is the latest update on where our medical people are on assignment.

Medical forces currently on operational assignment are:

Operation Southern Watch

Total medical/dental personnel: 216 (includes 21 BUMED augmentees)

In Country: Attached with the Administrative Support Unit Bahrain are four physicians, one dentist, three nurses, three medical service corps officers (MSCs) and 26 corpsmen. BUMED also provides one MSC and one yeoman to augment the COMUSNAVCENT staff out of Bahrain.

USS Lincoln (CVN 72) Carrier Battle Group: The aircraft carrier, which has 60 ward beds, one operating room, eight intensive care beds and four quiet room beds, has a medical/dental staff of 58, including two flight surgeons attached to the carrier's air wing.

Operation Provide Promise (Bosnia)

Total medical/dental personnel: 126

USS America (CV 66): The aircraft carrier, which has 45 ward beds, one operating room, eight intensive care beds and four quiet room beds, has a medical/dental staff of 54, including two flight surgeons attached to the carrier's air wing.

USS Guadalcanal (LPH 7) Amphibious Ready Group: Guadalcanal's medical/dental team of two officers and 13 enlisted personnel support 48 ward beds, two operating rooms, two intensive care beds, two quiet room beds and overflow bed capacity of 200.

LCDR Michael Henderson from Naval Medical Center Portsmouth, VA, in addition to one Air Force and three Army medical officers, has been tasked to replace the British Medical Staff officers being withdrawn from UNPROFOR HQ Zagreb.

Operation Haiti Assistance Group

Naval Medical Center Portsmouth, Naval Hospital Bremerton, WA, and Naval Hospital Pensacola, FL, will be providing a Humanitarian Support Team to provide medical care for military personnel in support of host-nation building efforts in Haiti and to provide humanitarian care to local populace. The team consists of two physicians, one nurse, two MSCs and six hospital corpsmen.

Operation Joint Task Force Full Accounting

Navy physicians and independent duty corpsmen are supporting this operation by volunteering to serve tours ranging from just under two weeks to two months. Naval Hospital Orlando, FL, Naval Hospital Jacksonville, FL, Naval Hospital Camp Lejeune, NC, and Naval Medical Center San Diego are providing personnel to augment four missions which are currently in country. Personnel to support 10 missions for FY94 have been identified.

Exercise Support

Individuals and components of mobile medical augmentation readiness teams (MMARTs) support various exercises/operations as required, bolstering the "organic" medical assets of the units involved.

Surgical Team 7: 17 people -- three physicians, three nurses, one MSC and 10 corpsmen from Naval Hospital Pensacola, FL -- are aboard USS Belleau Wood (LHA 3) to supplement Navy Medical support of Exercise Valiant Usher.

Fleet Surgical Teams are also deployed to provide additional medical support where needed, as directed by the CINCs.

Miscellaneous OCONUS and Fleet Support

Providing TAD (temporary additional duty) support to 12 fleet platforms and nine OCONUS facilities are 33 Navy Medical Department personnel: 16 physicians, four nurses, one MSC and 12 hospital corpsmen.

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HEADLINE: HEALTHWATCH: Smart Training Keeps You in the Running
USNH Yokosuka, Japan (NSMN) -- Injuries sustained from running are a common occurrence in a young and active population. By far most of these injuries result from cumulative trauma -- small amounts of stress over a period of time that eventually result in an injury to a joint, muscle or tendon. The odds of getting a running injury can be greatly decreased by using common sense and paying attention to the following factors:

SUBHEAD: Crowned Roads

Roads that are raised in the center and sloped near the edges can create an uneven running surface that places abnormal stresses on the legs and ankles. The "uphill" leg is at the highest risk of injury. To minimize the risk of injury when running on these roads, run in the middle of the road (if safe) or alternate sides of the road.

SUBHEAD: Uphill Running

Uphill running places great flexibility and strength demands on the calf muscles and Achilles' tendon (the cord behind the ankle). These areas are a very common site of injury and often occur from running hills when one is not accustomed to them. To lessen the risk of injury, gradually work hills into the training routine or avoid them altogether. If the terrain does involve a lot of hills, calf flexibility is vital. Stretching before and after you run is a must!

SUBHEAD: Foot Type

High-arched feet tend to be very rigid, placing individuals with this type of foot at high risk of injury. Running on a soft surface with a shoe that has a high degree of shock absorption will go a long way in preventing injury. On the other end of the spectrum are individuals with flat or pronated feet. It is best for these individuals to run on firm and even surfaces with a shoe that offers more stability than cushion. Various running magazines recommend specific shoes depending on the foot type.

SUBHEAD: Mileage

The farther one runs, the higher the risk of injury. However, if distance is gradually increased, the chance of sustaining an injury dramatically decreases. Distance should not be increased more than 10 percent per week.

SUBHEAD: Frequency

For optimal training and cardiovascular fitness, aerobic exercise should be performed a minimum of three days a week. If daily running is desired, an individual should already have been running three times a week for at least six weeks. In addition, hard and light days should be alternated.

SUBHEAD: Proper Warm Up and Stretching

Several studies have shown that stretching muscles first without warming up is ineffective and may increase risk of injury. The elasticity of the muscles and tendons increases dramatically when the body temperature is elevated only a few degrees. Therefore, before stretching, you should spend five minutes performing calisthenics or brisk walking to break a light sweat. If your primary goal is to increase flexibility, stretching should also be performed after the run or workout.

Generally, your risk of injury is higher the more you run, the faster you run, and the more you run on varied terrain. However, a high fitness level can be attained through running without injury by considering the above injury prevention tips. Story by LCDR G. Ernst, MSC, USNH physical therapist

-USN-

HEADLINE: HIV and You!

BUMED Washington (NSMN) -- The Centers for Disease Control and the American Hospital Association continue to reinforce that there is no substitute for adherence to universal precautions as the cornerstone of prevention of transmission of bloodborne pathogens (including the human immunodeficiency virus) in the hospital or other health care settings. Studies have shown that compliance with these precautions is less than ideal.

To minimize the risk of HIV transmission, either from patients to staff or staff to patients, all hospitals, regardless of their HIV caseload, should ensure adherence to the use of universal precautions. Additional guidance provided by the CDC states:

All health care workers (HCWs) should adhere to universal precautions, including the appropriate use of hand washing, protective barriers, and care in the use and disposal of needles and other sharp instruments. HCWs who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient care equipment and devices used in performing invasive procedures until the condition resolves. HCWs should also comply with current guidelines for disinfection and sterilization of reusable devices used in invasive procedures.

The CDC also states that currently available data provide no basis for recommendations to restrict the practice of HCWs infected with HIV or HBV who perform invasive procedures not identified as exposure-prone, provided the infected HCWs practice recommended surgical or dental technique and comply with universal precautions and current recommendations for sterilization/disinfection.

CDC states that exposure-prone procedures should be identified by medical/surgical/dental organizations and institutions at which the procedures are performed. Characteristics of exposure-prone procedures include digital palpation of a needle tip in a body cavity or the simultaneous presence of the HCW's fingers and a needle or other sharp instrument or object in a poorly visualized or highly confined anatomic site. Performance of exposure-prone procedures presents a recognized risk of percutaneous injury to the HCW, and -- if

such an injury occurs -- the HCW's blood is likely to contact the patient's body cavity, subcutaneous tissues, and/or mucous membranes.

The above information was obtained from the 1992 edition of the American Hospital Association's publication "AIDS/HIV Infection: Recommendations for Health Care Practices and Public Policy."

For more information or to become a Navy HIV prevention instructor call the Navy HIV Program at (301) 295-0048, DSN 295-0048.

Story compiled by LCDR Catherine Wilson, NC, USN
Surgeon General's Representative for HIV Education Policy

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4. Changes of Command: Information on new assignments of Navy Medical Department leaders.

HEADLINE: New CO at 2d Medical Battalion, Camp Lejeune

2D FSSG Camp Lejeune, NC (NSMN) -- CDR R.W. Renken, MC, assumed command of the 2d Medical Battalion, 2d Force Service Support Group, Camp Lejeune, NC, at a ceremony held 16 August 1993 at Soiffert Field, Camp Lejeune.

Prior to assuming command, Renken served as director, Residency Training, Department of Family Practice, Naval Hospital Charleston, SC. His assignment at Naval Hospital Charleston included a deployment to serve as officer-in-charge, Medical Operations, Camp Bulkely, Guantanamo Bay, Cuba, and as executive officer, Alpha Collecting and Clearing Company, Joint Task Force, Guantanamo Bay from 16 November 1991 to 21 March 1992.

Renken is the first medical corps officer to serve as commanding officer of the medical battalion since CDR Patrick O'Halloran, MC, who served from 16 July 1971 to March 1972.

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5. Two-month calendar of events:

OCTOBER

Child and Adolescent Healthcare Month

National Domestic Violence Prevention Month

National AIDS Awareness Month

Family Health Month

Lupus Awareness Month

National Disability Employment Awareness Month

National Family Sexuality Education Month

National Liver Awareness Month

National Physical Therapy Month

National Quality Month

10 October 1845: U.S. Naval Academy organized

10 October: National Metric Week begins

12 October: Active 0-7 MC, DC & NC Selection Boards convene

12-15 October: MSC DUINS Board Meets

13 October 1775: Congress ordered construction of a U.S.

Navy; 1993 Navy Birthday theme "...From the Sea, the Navy in Action"

16 October 1845: Ether first used in operation

16 October: U.N. World Food Day

17 October: National Dental Hygiene Week begins
17-23 October: National Infection Control Week
17-23 October: National Patient Account Management Week
18-22 October: National Medical Assistants' Week
20 October: National Medical Assistants' Day
21 October: National Biomedical Research Day
24 October: USMC Marathon, Arlington, VA; (703) 640-2225
24-30 October: National Adult Immunization Awareness Week
24-30 October: National Pharmacy Week
24 October: United Nations Day
25-31 October: National Pastoral Care Week
31 October: Daylight-Saving Time Ends (set clocks back one hour)
31 October: Halloween
31 October: LCDR FitReps due

NOVEMBER

American Heart Disease Prevention Month
Child Safety and Protection Month
National Diabetes Month
National Epilepsy Awareness Month
Aviation History Month
American Indian Heritage Month
1 November: Reserve O-7 MC, DC Selection Boards Convene
1 November 1848: First U.S. medical school exclusively for women opens in Boston, MA
1-5 November: National Health Information Management Week
1-7 November: National Medical Staff Services Professionals' Week
7-13 November: Patient Education Week
8-14 November: National Radiologic Technology Week
8-14 November: Operating Room Nurse Week
10 November 1775: U.S. Marine Corps founded
11 November: Veterans Day
14 November: American Education Week begins
14 November: National Geography Awareness Week begins
18 November: Great American Smokeout/Navy Smokeout Day
21 November: National Adoption Week begins
25 November: Thanksgiving
28 November - 4 December: National Home Care Week
30 November: E-6 Eval's due

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6. ADDRESSEES ARE ENCOURAGED TO SUBMIT INFORMATION AND NEWS ITEMS OF MEDICAL DEPARTMENT OR BENEFICIARY INTEREST (IN STORY FORMAT) BY TELEPHONE, FAX OR E-MAIL TO BUMED, ATTN: EDITOR, NAVAL SERVICE MEDICAL NEWS (MED 00P2). TELEPHONE (202) 653-1315; DSN 294-1315. FAX (202) 653-0086; DSN 294-0086. E-MAIL NMC0ENL@BUMED10.MED.NAVY.MIL.

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